PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Application or Docket Number			
CLAIMS AS FILED - PART I								SMALL EN	TITY	OR	OTHER SMALL		
U.S	NATIONAL	STAGE FEES	(Colum		1	(Column 2)	1			7			
			20		 			RATE	FEE	4	RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)-		LARGE ENT. = \$ 300			BASIC FEE	<u> </u>	OR	BASIC FEE	300	
EXAMINATION FEE			(4) = \$50 / \$ 100 U.S. is ISA = \$50 / \$ 100		All other situations = \$ 100 / \$ 200			EXAM. FEE	1		EXAM. FEE	200	
SEARCH FEE			ALL other countries = \$200 / \$400		ALL other situations = \$ 250 / \$ 500			SEARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			minu	us 100 =	/ 50 =			X \$ 125 =		1	X \$ 250 =	1	
TOTAL CHARGEABLE CLAIMS			20 minus 20 =		*			X \$ 25 =		OR	X \$ 50 =		
INDEPENDENT CLAIMS			3 minus 3 =		*			X \$ 100 =		OR	X \$ 200 =		
MULTIPLE DEPENDENT CLAIM PRE			SENT				ſ	+ \$ 180 =		OR	+ \$ 360 =	 	
* If the difference in column 1 is less than zero, enter "0)" in co	lumn 2	_	TOTAL		OR	TOTAL	900	
	CLAIMS AS AMENDED - PART (Column 1) (Column 1) (Column HIGHES					(Column 3)	r	SMALL E		OR	OTHER SMALL E		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT O				CLAIM			+ \$ 180 =		OR	+ \$ 360 =		
							1	TOTAL ADDIT. FFF		OR	TOTAL ADDIT.		
		(Column 1)		(Colum		(Column 3)				•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AME	Independent	*	Minus	***		=		X \$ 100 =	*****	OR	X \$ 200 =		
	FIRST PRES	ENTATION OF M	ULTIPLE DEPE	NDENT C	LAIM			+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT.										OR	TOTAL ADDIT.	•	
***	if the "Highest Nu If the "Highest Nu	rmn 1 is less than the mber Previously Paid mber Previously Paid nber Previously Paid	d For" IN THIS SPA d For" IN THIS SPA	ACE is less	than '20'	', enter "20".	ı the a	appropriate box	in column 1.				